

# Disposition of Unspent Contributions

DUSP 107

Reporting Form for Candidates (NRS 294A.180)

State of Nevada

**BEFORE COMPLETING THIS FORM, PLEASE READ THE REQUIREMENTS ON PAGE TWO**

(This page may be copied or duplicated if additional space is needed, but all pages must be attached when the report is filed.)

**NOTE: Any person who willfully violates the filing requirements is subject to a civil penalty of not more than \$5,000 for each violation and payment of court costs and attorney's fees!**

Christina R. Grunichigliani Assembly Assembly 9  
Name (print) Office Held District

**DATE OF THIS REPORT:** ☒ 15th day of the second month after his election if contributions remain ☐ 15th day of the second month after his defeat if contributions remain

**BEGINNING BALANCE OF UNSPENT CAMPAIGN**

**CONTRIBUTIONS AS OF JANUARY 1, 2000:** \$ 47,406.37

## EXPLANATION OF DISPOSITION

(This report should reflect any remaining campaign contributions from your previous election cycle only.)

AMOUNT:	DISPOSITION:
\$ <u>47,406.37</u>	Use the money for payments of expenses related
\$ <u>↓</u>	to my office, use for next election; contribu-
\$ <u>↓</u>	tions to other candidates/party and perhaps
\$ <u>↓</u>	contribute to non-profit entity
\$ <u>↓</u>	
\$ <u>↓</u>	
\$ <u>↓</u>	
\$ <u>↓</u>	

**REMAINING BALANCE OF UNSPENT CAMPAIGN CONTRIBUTIONS:** \$ \_\_\_\_\_

I do hereby swear (or affirm) under penalty of perjury that the assertions contained in this report are true

this 16 day of January, 2001

Christina R. Grunichigliani  
Signature of Public Officer

Christina R. Grunichigliani  
Name of Public Officer

706 Bracken Ave.  
Street Address

same  
Mailing Address if Different

LV NV 89104  
City and State Zip Code

702-366-1663  
Daytime Telephone Number

Total number of pages for this report 1

Office Use Only

CLARK COUNTY  
ELECTION DEPT

JAN 16 1 22 PM '01

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